

DISPOSITION WORKSHEET

Re: IV2472334 / SH2445343
Subject: Jose J. Morales # [REDACTED]
Investigator: Jeremy M. Carr, Internal Affairs Bureau
Advocate: Andrew B. Cruz, Advocate

DISPOSITION OF CHARGES

The following potential charges were prepared by the Advocacy Unit. Please indicate your disposition of the potential charges, and put any additional sustained charges (with reference to the investigation) on attached sheet(s).

Potential Charge(s):

The evidence in this investigation supports the following charges:

1. That in violation of Manual of Policy and Procedures Section 3-01/030.10 Obedience to Law, Regulations, and Orders, as it pertains to 3-10/150.00, Tactical Incidents, on or about January 16, 2018, Subject Jose Morales, while on-duty and assigned to Compton Sheriff's Station, failed to perform his duties in a manner which established and maintained the highest standard of efficiency in carrying out the functions and objectives of the Department, when he utilized strategies and/or tactics which failed to comply with Department policies, procedures, and/or training as evidenced by, but not limited to:
 - a. leaving his tactical position of advantage, and willingly running past a vehicle where the occupants had not been searched, therefore leaving his partner to deal with three (3) potential suspects; and/or,
 - b. positioning himself in an area and/or manner that lacked and/or had limited cover and/or avenues of escape and offered a significant advantage to an armed suspect.
2. That in violation of Department Manual of Policy and Procedures Section 3-01/030.10, as it pertains to Section 3-0/3/210.05, Revolver/Semi-Automatic Pistols (On and Off Duty), on or about January 16, 2018, Subject Morales, while on duty and assigned to Compton Sheriff's Station, failed to comply with Department policies, procedures, and/or training, when he possessed and/or utilized a magazine that was not loaded to the manufacturer's specified capacity.

Evidence Reference:

Defenses/Conflicting Evidence:

Disposition:

- ☒ **Charge founded as delineated**
☐ **Charge founded as modified**
☐ **Charge unresolved**
☐ **Charge unfounded**

Discipline Assessment

Review of Applicable Guidelines for discipline Section:

The Department's Guidelines for Discipline (Revised September 28, 2012) lists the following Analogous misconduct with associated disciplinary penalties:

Conduct

Standard Discipline

Obedience to Laws, Regulations and Orders

Written to Discharge

- MPP 3-10/150.00 Tactical Incidents
- MPP 3-03/210.05, Revolver/Semi-Automatic Pistols
(On and Off Duty)

Determination of Discipline:

Based upon the attached assessment of mitigating and aggravating factors, the following discipline has been determined to be appropriate. This discipline is subject to revision upon receipt of the subject's response of grievance.

- ☐ Discharge
☐ Reduction in Rank
☐ Suspension with loss of pay and benefits for ____ days
☐ Written Reprimand
☒ No Discipline

Assessment of Mitigating and Aggravating Factors:

The following describe the mitigating and aggravating factors in the determining the discipline in this investigation. Those factors include:

Intent	Truthfulness
Past Performance	Severity of Infraction
Degree of Culpability	Acceptance of Responsibility
Disciplinary History	Other Factors

Management has considered the subject's performance, which is documented in the Subject's Department personnel file, and those documents not contained in that file which are attached to the disposition worksheet.

Los Angeles County Sheriff's Department

Officer Involved Shooting

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Report Date: 10/23/2018		Bureau/Station/Facility: Central Patrol Division / Compton Station		Admin. Invest.? <input type="checkbox"/> Hit? <input type="checkbox"/>	
Incident Information					
URN: 018-00794-2846-055		Date: 01/16/18		Time: 1654	
City or Station: Compton Station		Nature of Incident: The suspect ran from deputies upon contact and a foot pursuit ensued. While traversing a stairwell, the suspect produced a firearm and a deputy involved shooting occurred.			
Location: 1116 South Long Beach Boulevard, Compton, CA 90221					
Location Type (check one or more): <input type="checkbox"/> Backyard <input type="checkbox"/> Beach <input checked="" type="checkbox"/> Business <input type="checkbox"/> Freeway <input type="checkbox"/> Industrial <input type="checkbox"/> Park <input type="checkbox"/> Parking Lot <input type="checkbox"/> Residence <input type="checkbox"/> Rural <input type="checkbox"/> School <input type="checkbox"/> Street Other: Stairwell		Lighting (check only one): <input type="checkbox"/> Darkness <input checked="" type="checkbox"/> Daylight <input type="checkbox"/> Other <input type="checkbox"/> Street Lights Weather (circle only one): <input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Fog <input type="checkbox"/> Rain Distance:		Incident Type (check one or more): <input type="checkbox"/> Accidental <input checked="" type="checkbox"/> Armed Person <input checked="" type="checkbox"/> Fleeing Suspect <input checked="" type="checkbox"/> Foot Pursuit <input type="checkbox"/> Gun Take Away <input type="checkbox"/> Moving Vehicle <input type="checkbox"/> Sniper/Ambush <input type="checkbox"/> Startle <input type="checkbox"/> Struggle Involved <input type="checkbox"/> Traffic Stop <input type="checkbox"/> Unarmed Person <input type="checkbox"/> Unintentional <input type="checkbox"/> Vehicle Pursuit <input type="checkbox"/> Warrant Service <input type="checkbox"/> Warning Shot Other:	
Initiated by (check only one): <input type="checkbox"/> Arrest Warrant <input type="checkbox"/> Call <input checked="" type="checkbox"/> Observation <input type="checkbox"/> One Person Unit <input type="checkbox"/> Other <input type="checkbox"/> Search Warrant <input type="checkbox"/> Two Person Unit Prior Activity (check only one): <input type="checkbox"/> Detective <input type="checkbox"/> Inmate Transport <input type="checkbox"/> Other <input checked="" type="checkbox"/> Routine Patrol		Aero Unit? <input type="checkbox"/> Canine Unit? <input type="checkbox"/>			
Total # of Shots Fired by Deputy 1		Total # of Shots Fired by Suspect 0			
Employee Witnesses					
Employee #	Last Name	First Name	M.I.	ShiftTime (check only one): <input type="checkbox"/> EM <input checked="" type="checkbox"/> PM <input type="checkbox"/> Day	ShiftType (check only one): <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Overtime <input type="checkbox"/> Off Duty
	Jimenez	Sergio	A.		
Employee #	Last Name	First Name	M.I.	ShiftTime (check only one): <input type="checkbox"/> EM <input checked="" type="checkbox"/> PM <input type="checkbox"/> Day	ShiftType (check only one): <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Overtime <input type="checkbox"/> Off Duty
	Ververa	Gabriela			
Employee #	Last Name	First Name	M.I.	ShiftTime (check only one): <input type="checkbox"/> EM <input checked="" type="checkbox"/> PM <input type="checkbox"/> Day	ShiftType (check only one): <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Overtime <input type="checkbox"/> Off Duty
	Tiwari	Kevin			
Non-Employee Witnesses					
Last Name		First Name		M.I.	
Street Address		City	Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.	
Street Address		City	Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.	
Street Address		City	Zip Code	Work Ph	Home Ph
Supervisors					
Employee #	Last Name	First Name	M.I.	(check one or more):	
	Spencer	Arturo	R.	<input checked="" type="checkbox"/> On Duty <input type="checkbox"/> Witness to shooting <input type="checkbox"/> Present during shooting <input type="checkbox"/> Involved in shooting	
Employee #	Last Name	First Name	M.I.	(check one or more):	
	Ververa	Gabriela		<input checked="" type="checkbox"/> On Duty <input type="checkbox"/> Witness to shooting <input type="checkbox"/> Present during shooting <input type="checkbox"/> Involved in shooting	
Watch Sergeant					
Employee #	Last Name	First Name	M.I.		
	Thomas	Arthur	R.		
Watch Commander					
Employee #	Last Name	First Name	M.I.		
	Tiwari	Kevin			

SH # **2445343**

Officer Involved Shooting Involved Employee Information

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Involved Employee										
E 1	Employee #		Last Name			First Name		M.I.		
			Morales			Jose		J.		
	Sex: M	Race: H	Rank: DSG		Unit Assignment: Compton Station		Work Assignment (Unit #, Module, etc.): 281F3			
	ShiftTime (circle only one): <input type="checkbox"/> EM <input checked="" type="checkbox"/> PM <input type="checkbox"/> Day		ShiftType (circle only one): <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Overtime <input type="checkbox"/> Off Duty		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:			
	Hospital Admission? <input type="checkbox"/>		Hospital Name:		Coroner Case? <input type="checkbox"/>		Coroner Case #		Interviewed? <input type="checkbox"/>	
	Hrs of sleep prior to shooting: 7		Duty Time (hrs): 10		Clothing (circle only one): <input type="checkbox"/> Plain Clothes no Vest <input type="checkbox"/> Raid Jacket w/ Vest <input type="checkbox"/> Plain Clothes w/ Vest <input type="checkbox"/> Uniform no Vest <input type="checkbox"/> Raid Jacket no Vest <input checked="" type="checkbox"/> Uniform w/ Vest		Other Factors:			
	Age:	Height: 508	Weight: 185		Range Qualification Date:		PPC Qualification Date:		Laser Training Date:	
	Certified with Weapon Used? <input type="checkbox"/>		Patrol Certification? <input type="checkbox"/>		Certification Unit:		Prior Shootings? <input type="checkbox"/>	Number of Prior Shootings:	Directed Force: <input type="checkbox"/>	
	Weapons Fired Brand: S & W		Caliber: 9MM		# Shots: 1		Weapons Fired Brand:		Caliber: # Shots:	
	Field Training Officer Emp #			Last Name			First Name			M.I.
Field Training Officer Emp #			Last Name			First Name			M.I.	
E	Employee #		Last Name			First Name		M.I.		
	Sex:	Race:	Rank:		Unit Assignment:		Work Assignment (Unit #, Module, etc.):			
	ShiftTime (circle only one): <input type="checkbox"/> EM <input type="checkbox"/> PM <input type="checkbox"/> Day		ShiftType (circle only one): <input type="checkbox"/> Regular <input type="checkbox"/> Overtime <input type="checkbox"/> Off Duty		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:			
	Hospital Admission? <input type="checkbox"/>		Hospital Name:		Coroner Case? <input type="checkbox"/>		Coroner Case #		Interviewed? <input type="checkbox"/>	
	Hrs of sleep prior to shooting:		Duty Time (hrs):		Clothing (circle only one): <input type="checkbox"/> Plain Clothes no Vest <input type="checkbox"/> Raid Jacket w/ Vest <input type="checkbox"/> Plain Clothes w/ Vest <input type="checkbox"/> Uniform no Vest <input type="checkbox"/> Raid Jacket no Vest <input type="checkbox"/> Uniform w/ Vest		Other Factors:			
	Age:	Height:	Weight:		Range Qualification Date:		PPC Qualification Date:		Laser Training Date:	
	Certified with Weapon Used? <input type="checkbox"/>		Patrol Certification? <input type="checkbox"/>		Certification Unit:		Prior Shootings? <input type="checkbox"/>	Number of Prior Shootings:	Directed Force: <input type="checkbox"/>	
	Weapons Fired Brand:		Caliber:		# Shots:		Weapons Fired Brand:		Caliber: # Shots:	
	Field Training Officer Emp #			Last Name			First Name			M.I.
Field Training Officer Emp #			Last Name			First Name			M.I.	
E	Employee #		Last Name			First Name		M.I.		
	Sex:	Race:	Rank:		Unit Assignment:		Work Assignment (Unit #, Module, etc.):			
	ShiftTime (circle only one): <input type="checkbox"/> EM <input type="checkbox"/> PM <input type="checkbox"/> Day		ShiftType (circle only one): <input type="checkbox"/> Regular <input type="checkbox"/> Overtime <input type="checkbox"/> Off Duty		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:			
	Hospital Admission? <input type="checkbox"/>		Hospital Name:		Coroner Case? <input type="checkbox"/>		Coroner Case #		Interviewed? <input type="checkbox"/>	
	Hrs of sleep prior to shooting:		Duty Time (hrs):		Clothing (circle only one): <input type="checkbox"/> Plain Clothes no Vest <input type="checkbox"/> Raid Jacket w/ Vest <input type="checkbox"/> Plain Clothes w/ Vest <input type="checkbox"/> Uniform no Vest <input type="checkbox"/> Raid Jacket no Vest <input type="checkbox"/> Uniform w/ Vest		Other Factors:			
	Age:	Height:	Weight:		Range Qualification Date:		PPC Qualification Date:		Laser Training Date:	
	Certified with Weapon Used? <input type="checkbox"/>		Patrol Certification? <input type="checkbox"/>		Certification Unit:		Prior Shootings? <input type="checkbox"/>	Number of Prior Shootings:	Directed Force: <input type="checkbox"/>	
	Weapons Fired Brand:		Caliber:		# Shots:		Weapons Fired Brand:		Caliber: # Shots:	
	Field Training Officer Emp #			Last Name			First Name			M.I.
Field Training Officer Emp #			Last Name			First Name			M.I.	

Officer Involved Shooting Suspect Information

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Suspect Information										
S 1	Last Name				Douglas		First Name		David	
	M.I.						M.I.		E.	
	AKA Last Name						First Name		SY	
	Sex: M		Race: B		Street Address:		City:		State & Zip Code:	
	Work Phone:		Home Phone:		Social Security #:		Driver's License #:			
	Age: 26		D.O.B.: 10/01/91		Height: 600		Weight: 160		FBI #:	
	Booking #		5206275		Primary Charge:		664/187(a) PC		Secondary Charge:	
	Coroner Case?		<input type="checkbox"/>		Coroner Case #		Intoxication/Drug Usage?		<input type="checkbox"/>	
	Armed?		<input checked="" type="checkbox"/>		Apprehended?		<input checked="" type="checkbox"/>		Mental Illness?	
	Vehicle Make		Model:		Year:		Parole:		No	
Probation:		Yes		Prior Felony Conviction:		Yes				
S	Last Name						First Name			
	M.I.						M.I.			
	AKA Last Name						First Name			
	Sex:		Race:		Street Address:		City:		State & Zip Code:	
	Work Phone:		Home Phone:		Social Security #:		Driver's License #:			
	Age:		D.O.B.:		Height:		Weight:		FBI #:	
	Booking #				Primary Charge:				Secondary Charge:	
	Coroner Case?		<input type="checkbox"/>		Coroner Case #		Intoxication/Drug Usage?		<input type="checkbox"/>	
	Armed?		<input type="checkbox"/>		Apprehended?		<input type="checkbox"/>		Mental Illness?	
	Vehicle Make		Model:		Year:		Parole:		Probation:	
Prior Felony Conviction:										
S	Last Name						First Name			
	M.I.						M.I.			
	AKA Last Name						First Name			
	Sex:		Race:		Street Address:		City:		State & Zip Code:	
	Work Phone:		Home Phone:		Social Security #:		Driver's License #:			
	Age:		D.O.B.:		Height:		Weight:		FBI #:	
	Booking #				Primary Charge:				Secondary Charge:	
	Coroner Case?		<input type="checkbox"/>		Coroner Case #		Intoxication/Drug Usage?		<input type="checkbox"/>	
	Armed?		<input type="checkbox"/>		Apprehended?		<input type="checkbox"/>		Mental Illness?	
	Vehicle Make		Model:		Year:		Parole:		Probation:	
Prior Felony Conviction:										
S	Last Name						First Name			
	M.I.						M.I.			
	AKA Last Name						First Name			
	Sex:		Race:		Street Address:		City:		State & Zip Code:	
	Work Phone:		Home Phone:		Social Security #:		Driver's License #:			
	Age:		D.O.B.:		Height:		Weight:		FBI #:	
	Booking #				Primary Charge:				Secondary Charge:	
	Coroner Case?		<input type="checkbox"/>		Coroner Case #		Intoxication/Drug Usage?		<input type="checkbox"/>	
	Armed?		<input type="checkbox"/>		Apprehended?		<input type="checkbox"/>		Mental Illness?	
	Vehicle Make		Model:		Year:		Parole:		Probation:	
Prior Felony Conviction:										

Los Angeles County Sheriff's Department

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Non-Employee Witnesses

[illegible]